

| CLAIMS ONLY | | | | | | | SERIAL NO. | FILING DATE |
|--------------------|----------|------|------------------------|------|------------------------|------|--------------|-------------|
| | | | | | | | APPLICANT(S) | |
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| | AS FILED | | AFTER 1st AMENDMENT | | AFTER 2nd AMENDMENT | | | |
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| TOTAL IND. | 28 | ↓ | | ↓ | | ↓ | | |
| TOTAL DEP. | 22 | | | | | | | |
| TOTAL CLAIMS | 50 | | | | | | | |

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

BEST AVAILABLE COPY